

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CityPAC

ADDRESS (number and street)

P.O. Box 1198

☐Check if different
than previously
reported. (ACC)

Chicago

IL

60690

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00187526

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. David Epstein

Signature of Treasurer

Electronically Filed by Mr. David Epstein

Date

10

13

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CityPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		67211.73
(b) Cash on Hand at Beginning of Reporting Period	125214.35	
(c) Total Receipts (from Line 19)	17211.32	134008.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	142425.67	201220.44
7. Total Disbursements (from Line 31)	38103.52	96898.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	104322.15	104322.15
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
CityPAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16000.00	123650.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	336.00	8303.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	16336.00	131953.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	16336.00	131953.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	100.00	119.70
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	775.32	1936.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17211.32	134008.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17211.32	134008.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4749.69	36979.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	4749.69	36979.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	44500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	2853.83	15419.13
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38103.52	96898.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38103.52	96898.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16336.00	131953.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16336.00	131953.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4749.69	36979.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	100.00	119.70
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4649.69	36859.46

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

ROBERT ASHER

Mailing Address 180 E Pearson St

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	8

Transaction ID: SA11AI.10461706

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

AVRAM BERKSON

Mailing Address 814 W Roscoe, No

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	8

Transaction ID: SA11AI.10461707

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

STEVEN FEIGER

Mailing Address 2314 N Cambridge Ave

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRAWFORD SUPPLY CO

Occupation

VP

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	8

Transaction ID: SA11AI.10461702

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

ALBERT FRIEDMAN

Mailing Address 1430 N Lake Shore Dr

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Owner

Occupation

Friedman Properties

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.10459343

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

DOUGLAS C GESSNER

Mailing Address 820 Woodbine Ln

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIRKLAND & ELLIS

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.10463326

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

JEFFREY GOURDJI

Mailing Address 1224 W. George St

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROPHET BRAND STRATEGY

Occupation

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.10465147

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

HOWARD GREEN

Mailing Address 1325 N Sutton Pl

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
ICEBERG ENTERPRISESOccupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	8

Transaction ID: SA11AI.10468922

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

NANCY KOHN

Mailing Address 545 West Aldine

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
POLITICAL FUNDRAISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	0	8

Transaction ID: SA11AI.10459344

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

ANDREW LAPPIN

Mailing Address 630 Lincoln Ave

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHETLAND PROPERTIESOccupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	0	8

Transaction ID: SA11AI.10466079

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 25

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

ROSIE MATTIO

Mailing Address 1322 W Diversey Pkwy

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dale and Thomas Popcorn

Occupation

Director of Public Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.10461996

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL MORGAN

Mailing Address 1549 Greenwood Ave

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.10461703

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

SANFORD E PERL

Mailing Address 570 Longwood Ave

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
KIRKLAND & ELLIS

Occupation

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.10463327

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

KEITH SHAPIRO

Mailing Address 280 Cedar

City

Highland Park

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREENBERG TRAUIG, LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.10461708

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

LEOR TORCHMAN

Mailing Address 3000 Hill St

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
LRSMEDIA

Occupation
INVESTOR RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.10461555

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

MARC YOSKOWITZ

Mailing Address 2910 N Commonwealth Ave

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
McKinsey & Company

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.10463325

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

16000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 10 S Wacker

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1260.69

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA15.10472095

Amount of Each Receipt this Period

100.00

Refund of annual fee

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CityPAC

A.

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 10 S Wacker

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1521.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA17.10472091

Amount of Each Receipt this Period

261.19

Interest earned

B.

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 10 S Wacker

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1793.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: SA17.10472092

Amount of Each Receipt this Period

271.35

Interest earned

C.

Full Name (Last, First, Middle Initial)

Smith Barney

Mailing Address 10 S Wacker

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2036.01

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: SA17.10472093

Amount of Each Receipt this Period

242.78

Interest earned

SUBTOTAL of Receipts This Page (optional)

775.32

TOTAL This Period (last page this line number only)

775.32

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive	Transaction ID: SB21B.113164 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 8</div> </div>
City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>755.13</div>
B. Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing gateway Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB21B.113165 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) AuthNet Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement Auth.net credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: SB21B.113166 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>327.18</div>

SUBTOTAL of Disbursements This Page (optional)

1092.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)
AuthNet

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Auth.net credit card processing gateway
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113167
Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)
AuthNet

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Auth.net credit card processing fee
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.113168
Date of Disbursement

/ /

Amount of Each Disbursement this Period

113.65

C.

Full Name (Last, First, Middle Initial)
Nancy Kohn Consulting

Mailing Address 101 w Grand Suite 200

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Services and expenses, DB, mailings, etc.
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.110650
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1004.58

SUBTOTAL of Disbursements This Page (optional)

1128.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial) Nancy Kohn Consulting	Transaction ID: SB21B.110649 Date of Disbursement																				
Mailing Address 101 w Grand Suite 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	8												
City Chicago State IL Zip Code 60654	Amount of Each Disbursement this Period																				
Purpose of Disbursement DB, data services Candidate Name	<table border="1"> <tr> <td colspan="10">698.59</td> </tr> </table>	698.59																			
698.59																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Peggy Shapiro Graphic Design	Transaction ID: SB21B.110652 Date of Disbursement																				
Mailing Address 2555 N Clark Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	8		2	0	0	8												
City Chicago State IL Zip Code 60614	Amount of Each Disbursement this Period																				
Purpose of Disbursement Award events program Candidate Name	<table border="1"> <tr> <td colspan="10">125.00</td> </tr> </table>	125.00																			
125.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Progress Printing Corp	Transaction ID: SB21B.110203 Date of Disbursement																				
Mailing Address 3324 South Halsted St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	3		2	0	0	8												
City Chicago State IL Zip Code 60608	Amount of Each Disbursement this Period																				
Purpose of Disbursement Brochures Candidate Name	<table border="1"> <tr> <td colspan="10">970.56</td> </tr> </table>	970.56																			
970.56																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1794.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)
Sage Systems LLC

Mailing Address PO Box 2201

City Peabody State MA Zip Code 01960

Purpose of Disbursement
Member DB fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.110651

Date of Disbursement

/ /

Amount of Each Disbursement this Period

725.00

SUBTOTAL of Disbursements This Page (optional)

725.00

TOTAL This Period (last page this line number only)

4739.69

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)
Bill Foster for Congress

Mailing Address PO Box 703

City Geneva State IL Zip Code 60134

Purpose of Disbursement

Candidate Name
William G Foster

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113158

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Christopher Shays for Congress Committee

Mailing Address 98 East Ave Rear building

City Norwalk State CT Zip Code 06851

Purpose of Disbursement

Candidate Name
Christopher Shays

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113154

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Davis for Congress

Mailing Address 5956 W Race Ave

City Chicago State IL Zip Code 60644

Purpose of Disbursement

Candidate Name
Danny K Davis

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113162

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial)
Donald A Manzullo for Congress

Mailing Address PO Box 7783

City State Zip Code
Rockford IL 61126

Purpose of Disbursement
Contribution

Candidate Name
Donald A Manzullo

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.110835

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Friends of Mark Warner

Mailing Address 1029 North Royal St. 2nd fl

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
Contribution

Candidate Name
Mark R Warner

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.110647

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
Friends of Mary Landrieu

Mailing Address 607 14th Street NW Suite 800

City State Zip Code
Washington DC 20005

Purpose of Disbursement

Candidate Name
Mary L Landrieu

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113161

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial) Friends of Phil Hare	Transaction ID: SB23.113159 Date of Disbursement
Mailing Address 224 18th St	<div> <div>09</div> <div>25</div> <div>2008</div> </div>
City Rock Island State IL Zip Code 61204	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Philip G Hare	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Tim Johnson	Transaction ID: SB23.113160 Date of Disbursement
Mailing Address PO Box 17097	<div> <div>09</div> <div>25</div> <div>2008</div> </div>
City Urbana State IL Zip Code 61803	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Tim Johnson	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jeanne Shaheen for Senate	Transaction ID: SB23.113151 Date of Disbursement
Mailing Address PO Box 1510	<div> <div>09</div> <div>25</div> <div>2008</div> </div>
City Manchester State NH Zip Code 03105	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>3000.00</div>
Candidate Name Jeanne Shaheen	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)
Jesse Jackson Jr for Congress

Mailing Address PO Box 490286

City Chicago State IL Zip Code 60649

Purpose of Disbursement
Contribution

Candidate Name
Jesse L Jackson

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.110645

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
Jim Risch for US Senate Committee

Mailing Address 407 W Jefferson St

City Boise State ID Zip Code 83702

Purpose of Disbursement

Candidate Name
James E Risch

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113155

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Judy Biggert for Congress

Mailing Address PO Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement
Contribution

Candidate Name
Judy Biggert

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.110646

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial) Kagen 4 Congress	Transaction ID: SB23.113152 Date of Disbursement
Mailing Address 100 W College Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Appleton State WI Zip Code 54911	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Steven L Kagen	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Kirk for Congress	Transaction ID: SB23.113150 Date of Disbursement
Mailing Address PO Box 8	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Winnetka State IL Zip Code 60093	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>5000.00</div>
Candidate Name Mark Steven Kirk	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Klein for Congress	Transaction ID: SB23.110836 Date of Disbursement
Mailing Address 21301 Powerline Road Suite 204	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 8</div> </div>
City Boca Raton State FL Zip Code 33433	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Ron Klein	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial) Knollenberg for Congress	Transaction ID: SB23.110834 Date of Disbursement
Mailing Address 31000 Telegraph Road #110	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 8</div> </div>
City Bingham Farms State MI Zip Code 48025	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Joseph K Knollenberg	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Schock for Congress	Transaction ID: SB23.113157 Date of Disbursement
Mailing Address PO Box 10555	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Peoria State IL Zip Code 61612	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Aaron Schock	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Udall for us all	Transaction ID: SB23.113149 Date of Disbursement
Mailing Address 3311 Candelaria NE Suite A	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Albuquerque State NM Zip Code 87107	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>1000.00</div>
Candidate Name Tom Udall	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address PO Box 5458

City Springfield State IL Zip Code 62705

Purpose of Disbursement

Candidate Name
John M Shimkus

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Wicker for Senate

Mailing Address PO Box 64

City Jackson State MS Zip Code 39205

Purpose of Disbursement

Candidate Name
Roger F Wicker

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.113153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

30500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A.

Full Name (Last, First, Middle Initial)

Lisa Acker

Mailing Address

City

State

Zip Code

Purpose of Disbursement
reimbursement (see memo)

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.110654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

844.62

B.

Full Name (Last, First, Middle Initial)

Bar Louie

Mailing Address 47 W Polk St

City
Chicago

State
IL

Zip Code
60605

Purpose of Disbursement
reimbursement - SJ after event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.110655

Date of Disbursement

/ /

Amount of Each Disbursement this Period

507.62

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Artistic Judaic Promotions

Mailing Address 4990 S Lafayette Lane

City
Englewood

State
CO

Zip Code
80113

Purpose of Disbursement
reimbursement - Honoree awards

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.110656

Date of Disbursement

/ /

Amount of Each Disbursement this Period

337.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

844.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
CityPAC

A. Full Name (Last, First, Middle Initial)
Chicago Festival of Israeli Cinema

Mailing Address PO Box 118512

City Chicago State IL Zip Code 60611

Purpose of Disbursement
CoSponsor Film Festival

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.110648

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1410.00

B. Full Name (Last, First, Middle Initial)
Yossi Klein Halevi

Mailing Address The Shalem Center, 13 Yehoshua Bin

City Jerusalem Israel State Zip Code

Purpose of Disbursement
Hotel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.110653

Date of Disbursement

/ /

Amount of Each Disbursement this Period

239.21

C. Full Name (Last, First, Middle Initial)
Progress Printing Corp

Mailing Address 3324 South Halsted St.

City Chicago State IL Zip Code 60608

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.113001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

360.00

SUBTOTAL of Disbursements This Page (optional)

2009.21

TOTAL This Period (last page this line number only)

2853.83